

Date of Request:

## MWR Marketing Division Media Request Form

Fort Jackson, South Carolina

Request Completion Date:

## **Date Information (please print)**

## MWR GRAPHIC REQUEST

Date to be Used:

Date[s] of Event		From:		То:	
Point Of Contact In	formation				
Main POC Name					
Back-up POC Nar	me				
Phone/Fax/C	ell				
E-mail addre	ess				
Directorate or Activ	rity				
Print Graphics / No	ewsletter / Leader	r			
	Total # Copies	**Paper Size & Stock	**Paper Color	**Ink Color	***Full Color
Poster					
Flyer					
Business Card					
Invitation					
Brochure					
Form					
*Other					
*Special Instruction	ns:	I	I	l	l

To expedite your project, please e-mail word, text and/or image files to the MWR Markting Division Graphic Artist. Please include information listed above in e-mail. Call 751-6990 for more information.